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TOTAL FEE(S) DUE

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APPLICATION NO. FILING DATE		FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/601,577	06/24/2003	Soren Christrup	3764-147	8211

TITLE OF INVENTION: INHALER

APPLN. TYPE

Typed or printed name

nonprovisional	. NO	\$1370	)	\$300	\$1670	01/04/2005	
EXAMINER		ART UNIT		CLASS-SUBCLASS			
LEWIS, AARON J		3743		128-200230	•		
1. Change of correspondence address or indication of "Fee Address" (3° CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custome Number is required.			(1) the na or agents (2) the na registered 2 registered listed, no	nting on the patent front page, li times of up to 3 registered pater OR, alternatively, me of a single firm (having as a attorney or agent) and the name ed patent attorneys or agents. If name will be printed.	nt attorneys 1_Nixo	n & Vanderhye	
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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.			☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).				
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This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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Leonard C.

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